SCHEDULE B (FEC Form 3X)		INE NUMBER:	NUMBER: PAGE193294OF193526				
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check	only one)				
	Detailed Summary Page		21b 22 27 X 28a	23 28b	24 28c	25 26 30b	
Any information copied from such Reports and Stater	nente may not be cold or us	ed by any					
or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
ActBlue							
Full Name (Last, First, Middle Initial)			Doto of	Disbursem	ont		
DEB SUHR							
Mailing Address 2380 KIPLING DR.			02	24		15	
City	State Zip Code		-		00004 055	2000	
SAGINAW	MI 48602		Irans	action ID :	SB28A_2550	J9896	
Purpose of Disbursement Contribution Refund			Amount	of Each D	isbursement	this Period	
Candidate Name		Categor	y/			25.00	
		Type		7	7	25.00	
Office Sought: House Disburser							
Senate President	Primary General Other (specify) ▼				on, initially ea S (C0049856	armarked for F	
State: District:	Other (Specify)		OI OIL		C (00043000	·• <i>)</i>	
Full Name (Last, First, Middle Initial)							
MARGARET SULLIVAN			Date of	Disbursem	ent		
W/ (ICO/(ICE I GOLEIV/(IC			M = M	/ D D	/ Y Y	YY	
Mailing Address BOX 97			02	28)15	
City	State Zip Code		Trans	action ID ·	SB28A_256	39241	
STONY BROOK	NY 11790				0520,(_200		
Purpose of Disbursement Contribution Refund			Amount	of Each D	isbursement	this Pariod	
Candidate Name				OI Eacii D	isbursement	IIIS FEIIOU	
Outraidate Name		Categor Type	y/			15.00	
Office Sought: House Disburser	ment For:	1900	_	,	7		
Senate	Primary General		Refund	of contribut	ion. initially e	armarked for	
President	Other (specify) ▼		DEMOC	CRATIC CO	NGRESSION	IAL CAMPAIG	
State: District:			COMMI	TTEE (C00	0009		
Full Manney (Least Fig.), ARTHUR 2, 99 W							
Full Name (Last, First, Middle Initial)							
Full Name (Last, First, Middle Initial) MARGARET SULLIVAN			Date of	Disbursem	ent		
MARGARET SULLIVAN			M = M	/ D D	/ Y Y	YYY	
					/ Y Y	15	
MARGARET SULLIVAN Mailing Address BOX 97	State Zin Code		02	28	/	15	
MARGARET SULLIVAN Mailing Address BOX 97 City	State Zip Code NY 11790		02	28	/ Y Y	15	
MARGARET SULLIVAN Mailing Address BOX 97 City STONY BROOK Purpose of Disbursement	·		02	28	/	15	
MARGARET SULLIVAN Mailing Address BOX 97 City STONY BROOK Purpose of Disbursement Contribution Refund	·		02 Trans	28 action ID :	/	39244	
MARGARET SULLIVAN Mailing Address BOX 97 City STONY BROOK Purpose of Disbursement	·	Categor	Trans Amount	28 action ID :	/ 20 SB28A_256	15 39244 this Period	
MARGARET SULLIVAN Mailing Address BOX 97 City STONY BROOK Purpose of Disbursement Contribution Refund Candidate Name	NY 11790	Categor Type	Trans Amount	28 action ID :	/ 20 SB28A_256	39244	
MARGARET SULLIVAN Mailing Address BOX 97 City STONY BROOK Purpose of Disbursement Contribution Refund Candidate Name Office Sought: House Disburser	NY 11790 ment For:		Trans Amount	action ID :	SB28A_2563	39244 this Period 5.00	
MARGARET SULLIVAN Mailing Address BOX 97 City STONY BROOK Purpose of Disbursement Contribution Refund Candidate Name Office Sought: House Senate	NY 11790 ment For: Primary General		Trans Amount	28 action ID:	SB28A_2563	15 39244 this Period	
MARGARET SULLIVAN Mailing Address BOX 97 City STONY BROOK Purpose of Disbursement Contribution Refund Candidate Name Office Sought: House Senate President	NY 11790 ment For:		Trans Amount	28 action ID:	SB28A_2563	39244 this Period 5.00	
MARGARET SULLIVAN Mailing Address BOX 97 City STONY BROOK Purpose of Disbursement Contribution Refund Candidate Name Office Sought: House Senate	NY 11790 ment For: Primary General		Trans Amount	28 action ID:	SB28A_2563	39244 this Period 5.00	
MARGARET SULLIVAN Mailing Address BOX 97 City STONY BROOK Purpose of Disbursement Contribution Refund Candidate Name Office Sought: House Senate President	nent For: Primary General Other (specify) ▼	Type	Trans Amount (C0040	28 action ID:	SB28A_2563	39244 this Period 5.00	